Insert QR Code

EMERGENCY COMMUNICATION AID

JURISDICTION LOGO

Name: _____ **Pronoun(s):** _____

Address: _____

Emergency Contact Name: _____ **Emergency Contact Phone:** _____

HELP	YES	NO	OKAY	STOP	SICK	NEED	AMBULANCE	HOSPITAL	MEDICINE
I/ME/MY	YOU/YOUR	HE/HIM	SHE/HER	THEY/THEM	NOT SAFE	HURT	POLICE	FIRE DEPT	COUNSELOR
SON	DAUGHTER	CHILD	BABY	PET	GRAND-PARENT	BATHROOM			

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Insert QR Code

EMERGENCY COMMUNICATION AID

JURISDICTION LOGO

Medical Condition(s)_____

_____

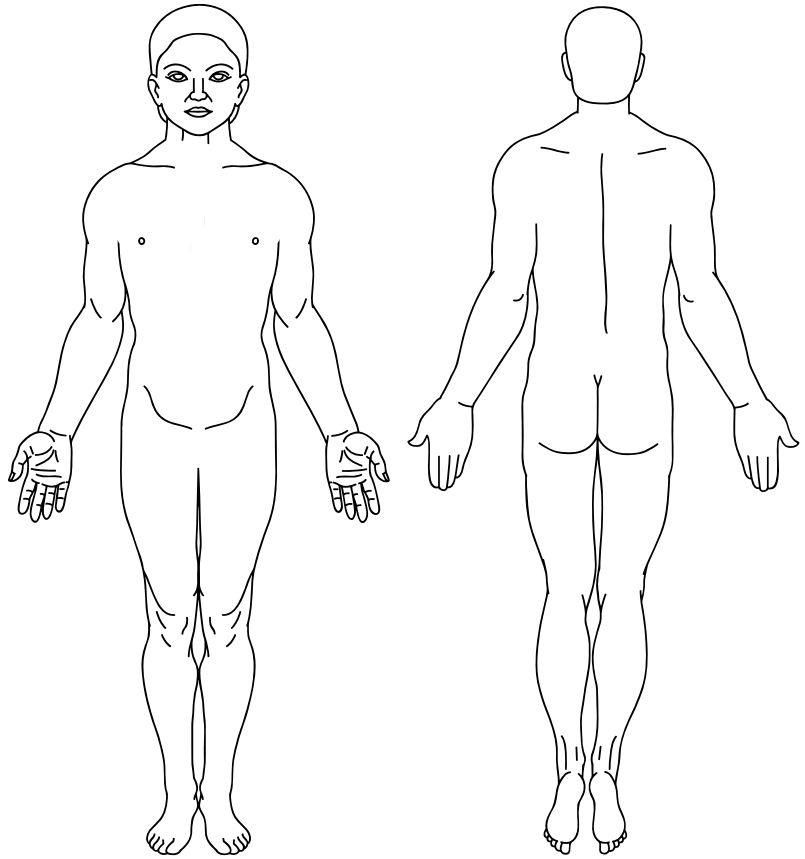
HOT | COLD | NOT SURE | SCARED | LOST | CONFUSED | PREGNANT | HURT | SICK | NEED

YES | NO

FEEL | SEE | SMELL

HEAR | TASTE

FOOD | WATER

PAIN SCALE

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